

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in Ink.

COVER PAGE

FILE Date Stamp MAY 25 2006 REGISTRAR OF VOTERS By <i>[Signature]</i> Deputy	CALIFORNIA FORM	460
	Page 1 of 26 For Official Use Only	

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from **03-18-2006**
through **05-20-2006**

Date of election if applicable:
(Month, Day, Year)

06-04-2006

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<small>(Also Complete Part 5)</small> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<small>(Also Complete Part 6)</small> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |

2. Type of Statement:

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Preelection Statement
<input type="checkbox"/> Semi-annual Statement
<input type="checkbox"/> Termination Statement
<small>(Also file a Form 410 Termination)</small>
<input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement
<input type="checkbox"/> Special Odd-Year Report
<input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

3. Committee Information

I.D. NUMBER
961967

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Friends of Mike Carona

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Lesley Ann Stoll

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on **05-23-2006**
Date
Executed on **5-25-2006**
Date
Executed on _____
Date
Executed on _____
Date

By *[Signature]*
Signature of Treasurer or Assistant Treasurer
By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent
By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

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FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Michael S. Carona

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Sheriff-Coroner, Orange County

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Mike Carona

Statement covers period
from 03-18-2006

through 05-20-2006

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I.D. NUMBER

961967

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 42,975.00	\$ 600,335.00
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 42,975.00	\$ 600,335.00
4. Nonmonetary Contributions	Schedule C, Line 3	4,634.26	4,634.26
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 47,609.26	\$ 604,969.26

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$ 339,919.72	\$ 638,608.47
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 339,919.72	\$ 638,608.47
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	(-27,725.00)	0.00
10. Nonmonetary Adjustment	Schedule C, Line 3	4,634.26	4,634.26
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 316,828.98	\$ 643,242.73

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 618,443.37
13. Cash Receipts	Column A, Line 3 above	42,975.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	457.14
15. Cash Payments	Column A, Line 8 above	339,919.72
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 321,955.79

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ 0.00

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$	\$
21. Expenditures Made	\$	\$

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
/ /	\$
/ /	\$

*Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from 03-18-2006
through 05-20-2006

CALIFORNIA
FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Mike Carona

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I.D. NUMBER

961967

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				0.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)

\$ 42,900.00

2. Amount received this period – unitemized monetary contributions of less than \$100

\$ 75.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)

TOTAL \$ 42,975.00

*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER							I. D. NUMBER
Friends of Mike Carona							961967
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)	
05-12-06	Ronald Allen	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Finance Manager, Fletcher Jones Motorcars	\$100	\$100	\$100	
03-24-06	Gordafrid Aresh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$1,500	\$1,500	\$1,500	
03-24-06	Tahamtan Aresh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO, Aresh Enterprises	\$1,500	\$1,500	\$1,500	
03-29-06	Arnel Development Company	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	N/A	\$500	\$500	\$500	
05-17-06	Niall Armstrong	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Senior VP, Tutton Insurance Services	\$1,000	\$1,000	\$1,000	
04-02-06	Sam Autrev	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100	
05-15-06	Barbara Becker	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100	
SUBTOTAL \$				\$4,800			

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER						I. D. NUMBER
Friends of Mike Carona						961967
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-08-06	Fred Berg	[x] IND [] COM [] OTH [] PTY [] SCC	President, Staybright Electric	\$500	\$500	\$500
05-08-06	James Bergman	[x] IND [] COM [] OTH [] PTY [] SCC	Airline Captain, Northwest Airlines	\$500	\$500	\$500
05-08-06	Mark Beraquist	[x] IND [] COM [] OTH [] PTY [] SCC	Retired	\$200	\$200	\$200
04-18-06	Richard Berteau	[x] IND [] COM [] OTH [] PTY [] SCC	Retired	\$1,500	\$1,500	\$1,500
03-18-06	Joyce Black	[x] IND [] COM [] OTH [] PTY [] SCC	Homemaker	\$1,000	\$1,000	\$1,000
04-14-06	Bruce Bridgeman	[x] IND [] COM [] OTH [] PTY [] SCC	Attorney, Bruce C. Bridgeman, Attorney at Law	\$500	\$500	\$500
05-11-06	Antonio Cagnolo	[x] IND [] COM [] OTH [] PTY [] SCC	Owner, Antonello's Ristorante	\$1,500	\$1,500	\$1,500
SUBTOTAL \$				\$5,700		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
from 03/18/2006
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-05-06	Judi Cannon	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Paralegal, Ronald E. Harrington, Esq.	\$1,500	\$1,500	\$1,500
05-05-06	Gary Cannon	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CPA, Ginger Masonry	\$500	\$500	\$1,500
04-28-06	Evan's Gunsmithing Shooters World	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$1,500	\$1,500	\$1,500
05-08-06	Michael Child	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Marketing, Western Photographic Supply	\$200	\$200	\$200
05-15-06	David Corsiglia	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Technician, County of Orange	\$200	\$300	\$300
05-10-06	Margery Cosentino	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$100	\$100
03-24-06	Daniel VII, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$1,500	\$1,500	\$1,500
SUBTOTAL \$				\$5,500		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
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NAME OF FILER						I. D. NUMBER
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-17-06	Ronald Davies	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Dental Anesthesiologist	\$200	\$200	\$299
05-08-06	Franklin Dimino	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
05-15-06	Cindy Dooley	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President, Dooley Enterprises	\$200	\$200	\$200
04-27-06	Albert Geigele	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate, Associated Properties, Inc.	\$100	\$100	\$100
05-15-06	Sheri Geoffreys	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Photographer, Sheri Geoffreys Photography	\$100	\$100	\$100
05-18-06	Brian Glabman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO, Glabman Furniture & Interior Design	\$1,500	\$1,500	\$1,500
05-11-06	Marshall Goldberg	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chief of Financial Services, California Dermatology	\$500	\$500	\$500
SUBTOTAL \$				\$2,700		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER						I. D. NUMBER
Friends of Mike Carona						961967
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-18-06	Julianne Gordon	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retail Clerk, Quality Toyota	\$1,500	\$1,500	\$1,500
05-18-06	Nichole Gordon	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retail Clerk, Quality Toyota	\$1,500	\$1,500	\$1,500
05-18-06	Robert Gordon	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,500	\$1,500	\$1,500
05-09-06	Robert Green	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney, Green & Hall, APC	\$200	\$200	\$200
05-06-06	Brian Gwartz	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Physician	\$1,000	\$1,000	\$1,000
03-27-06	Peggy Hanshaw	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$500	\$500	\$500
03-27-06	Frederick J. Hanshaw Properties	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$1,500	\$1,500	\$1,500
SUBTOTAL \$				\$7,700		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-05-06	Mark Hergesheimer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner, Hergesheimer Motor Sports	\$200	\$200	\$200
05-08-06	Mike Jones	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Management, C. Michael, Inc.	\$300	\$300	\$300
05-01-06	Michael Keskinen 8	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales, Kestech Inc.	\$100	\$100	\$299
03-24-06	Hassan Kheradmendan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, Bicentennial Realtors	\$500	\$500	\$500
05-08-06	Roy Kim	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VP, Thompson Building Material	\$100	\$100	\$100
05-08-06	Julie Kramer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Clerk, Trader Joe's	\$100	\$100	\$100
05-03-06	Kathryn Leigh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Proper Management, Bircher Anderson Properties	\$100	\$100	\$100
SUBTOTAL \$				\$1,400		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
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NAME OF FILER					I. D. NUMBER	
Friends of Mike Carona					961967	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-10-06	Antonio Mancini	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$200	\$200	\$200
03-29-06	Azam Maseeh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$1,500	\$1,500	\$1,500
03-29-06	Fariborz Maseeh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Managing Partner, Picoco LLC	\$1,500	\$1,500	\$1,500
05-15-06	Kathalleyne McCullough	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$1,500	\$1,500	\$1,500
05-18-06	Edwin McPherson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Managing Partner, McPherson & Kalmansohn, LLP	\$1,000	\$1,000	\$1,000
05-16-06	John Messina	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney, John A. Messina Jr. Attorney at Law	\$200	\$200	\$200
05-17-06	P.D. Towing Only, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$1,500	\$1,500	\$1,500
SUBTOTAL \$				\$7,400		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
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NAME OF FILER						I. D. NUMBER
Friends of Mike Carona						961967
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
05-03-06	Jeffrey Pack	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Purchasing Agent, Stonefield Development	\$150	\$150	\$150
05-11-06	Michael Polen	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
05-12-06	R.W. Forsum Enterprises	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$1,000	\$1,000	\$1,000
05-16-06	R.J. Rangel	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$200	\$200	\$200
05-16-06	Richard Reisman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Publisher, O.C. Business Journal	\$200	\$200	\$200
05-17-06	Alfred Rossman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner, Mint State Coin Galleries	\$500	\$500	\$500
05-09-06	Joseph Saba	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Low Voltage Contractor	\$200	\$200	\$200
SUBTOTAL \$				\$2,350		

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER							I. D. NUMBER
Friends of Mike Carona							961967
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)	
05-08-06	A. R. Salbi	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, Salbi Realty, Inc.	\$100	\$100	\$100	
05-08-06	Ali Salbi	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Agent, Salbi Realty, Inc.	\$100	\$100	\$100	
05-08-06	Lolita Salbi	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife	\$100	\$100	\$100	
03-18-06	Law Offices of Frederico C. Sayre	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$1,000	\$1,000	\$1,000	
05-08-06	Robert Schulz	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, Schulz Industries	\$200	\$200	\$200	
05-08-06	Steve Smith	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, Taco Steve, Inc.	\$500	\$500	\$500	
03-18-06	Mindy Stearns	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TV Host, MIVA Productions	\$1,500	\$1,500	\$1,500	
SUBTOTAL \$				\$3,500			

Schedule A (Continuation Sheet)
Monetary Contributions Rec'd

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER						I. D. NUMBER
Friends of Mike Carona						961967
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
04-24-06	Burke Stevens	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Dentist	\$100	\$100	\$100
05-15-06	Michael Tenerelli	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer, Subia Erickson Tenerelli & Russo LLP	\$750	\$750	\$750
05-08-06	Garfield Thompson, Jr.	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, GM Funding	\$200	\$200	\$200
05-17-06	Lynne Vanderwall	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, United Polychem, Inc.	\$500	\$500	\$500
04-04-06	Rebecca Wilson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney-at-Law, Wilson & Associates	\$300	\$300	\$1,500
SUBTOTAL \$				\$1,850		

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from 03-18-2006 through 05-20-2006		SCHEDULE C CALIFORNIA FORM 460 Page 15 of 26 I.D. NUMBER 961967	
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Friends of Mike Carona

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05-18-06	Alan Crummack	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, Choice One Enterprises, Inc.	catering for event	\$1,500.00	\$1,500.00	n/a
05-18-06	Tori Crummack	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Senior VP/Broker, Choice One Enterprises, Inc.	catering for event	\$1,500.00	\$1,500.00	n/a
03-15-06	Ali Jahagiri	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President, American Preventive Imaging Assoc.	beverages & server staff for event	\$634.26	\$634.26	n/a
05-18-06	Los Cerritos Community Newspaper	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	advertisement	\$1,000.00	\$1,000.00	n/a

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 4,634.26

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.

(Include all Schedule C subtotals.) \$ 4,634.26

2. Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ 0.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL \$ 4,634.26**

*Contributor Codes
 IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

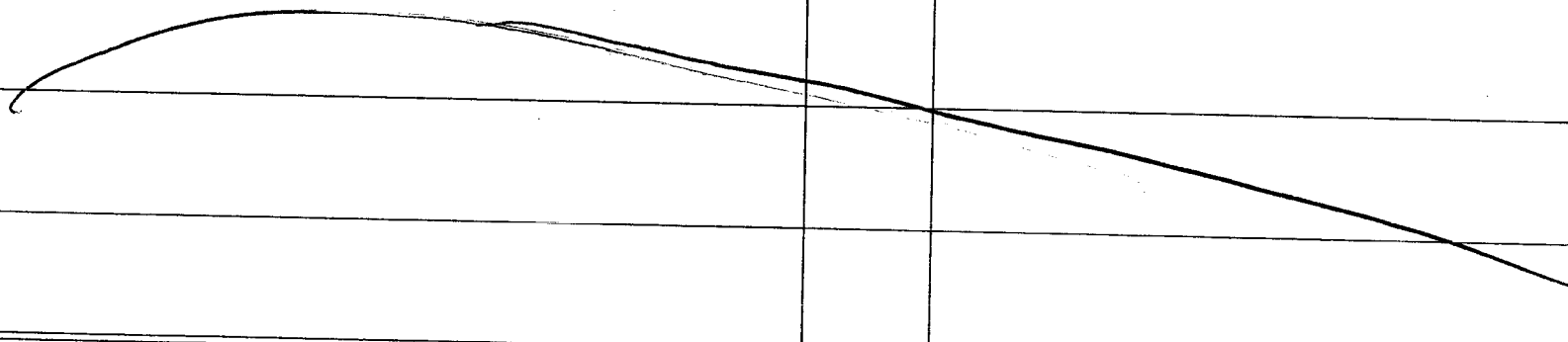
Statement covers period		CALIFORNIA FORM 460	
from	03-18-2006	Page	16 of 26
through	05-20-2006	I.D. NUMBER	961967

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Friends of Mike Carona

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
				
SUBTOTAL \$				0.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	339,611.48
2. Unitemized payments made this period of under \$100	\$	308.24
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	339,919.72

Schedule E
(Continuation Sheet)
Payments Made

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER			I. D. NUMBER
Friends of Mike Carona			961967
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
George Adams	RFD		\$1,500.00
American Diabetes Association	CVC		\$400.00
American Express Company World Financial Center		credit card fees	\$867.31
AT&T	OFC		\$779.30
Awards 35 / OC Human Relations	CVC		\$200.00
Bell, McAndrews & Hiltachk, LLP	LEG		\$3,691.18
BlogAtomic		internet ad	\$550.00
Roberto Brutocao	RFD		\$500.00
California Taxnavers Alliance		slate - ID# pending	\$6,000.00
		SUBTOTAL \$	\$14,487.79

Schedule E
(Continuation Sheet)
Payments Made

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER		I. D. NUMBER	
Friends of Mike Carona		961967	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT
Capital Campaigns			AMOUNT PAID
		CNS	\$5,000.00
Capital Campaigns		FND	commission \$1,624.00
Capital Campaigns		OFC/ FND	expenses (see Schedule G) \$740.10
Cardservice International			credit card fees \$1,074.43
Michael Carona			officeholder expenses \$917.37
Cingular Wireless		OFC	\$205.25
Citizens for Representative Government (CRG) Voter Guide			slate - ID #595003 \$5,000.00
Coalition for Senior Citizen Security			slate - ID #592015 \$5,820.00
COPS VOTER GUIDE			slate - ID #599014 \$7,525.00
Copyright Printing		LIT	\$781.19
		SUBTOTAL \$ \$28,687.34	

Schedule E
(Continuation Sheet)
Payments Made

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER		I. D. NUMBER	
Friends of Mike Carona		961967	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT
Council of Concerned Women Voters Legislative Guide			AMOUNT PAID
			slate - ID #1226327
CRA Voter Guide			\$5,965.00
			slate - ID #1271601
Crime Survivors, Inc.			\$11,424.96
		CVC	\$100.00
Dynamic Marketing, Inc. (DMI)			
		FND	\$250.00
Family, Faith & Freedom Association			slate - ID #1270781
			\$13,500.00
FedEx Kinko's		OFC	\$477.20
Stephen Harvey		LIT	\$811.88
Steve Hiller		CVC	\$576.16
Imagine Service Beyond Your Expectations		FND	\$1,600.00
JC-Evans, Inc.		LIT	\$1,111.61
		SUBTOTAL \$	
		\$35,816.81	

Schedule E
(Continuation Sheet)
Payments Made

Statement covers period
 from 03/18/2006
 through 05/20/2006

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NAME OF FILER		I. D. NUMBER	
Friends of Mike Carona		961967	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT
			AMOUNT PAID
Lewis Consulting Group, LLC		CNS	\$5,000.00
The Monaco Group		LIT	see Schedule G for detail
Cherie Navarro			independent contractor
Dorothy Neblett		RFD	\$250.00
NISON Opinion Research		POL	\$4,815.00
Office Max		OFC	\$169.02
Official Non-Partisan Voter Guide (ONPVGC)			slate - ID #1277947
Orange County Con Bowl		CVC	\$800.00
Orange County Property Rights Coalition			slate - ID# pending
Orange County Republican Leadership Voter Guide			slate - ID #1285120
SUBTOTAL \$			\$168,714.28

Schedule E
(Continuation Sheet)
Payments Made

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER		I. D. NUMBER	
Friends of Mike Carona		961967	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Our Voice Latino Voter Guide		slate - ID #599015	\$2,122.00
Peace Officers Firefighters Fellowship (POFF)	CVC		\$160.00
Political Data, Inc.	POL		\$2,128.97
PoliticalCalling.com	PHO		\$20,000.00
Right on Time Signs	LIT		\$8,750.00
Rutan & Tucker, LLP	LEG		\$13,997.01
Sign Strategies	LIT		\$11,531.95
Sunburst Plaques	CVC		\$621.90
Team California		slate - ID #598036	\$5,871.00
Verizon Wireless	OFC		\$197.43
SUBTOTAL \$			\$65,380.26

Schedule E
(Continuation Sheet)
Payments Made

Statement covers period
 from 03/18/2006
 through 05/20/2006

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NAME OF FILER				I. D. NUMBER
Friends of Mike Carona				961967
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Voter Information Guide			slate - ID #593003	\$17,725.00
Your Ballot Guide			slate - ID #588011	\$8,800.00
			SUBTOTAL \$	\$26,525.00

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Mike Carona

Statement covers period from 03-18-2006 through 05-20-2006		CALIFORNIA FORM 460
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I.D. NUMBER 961967		

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Rutan & Tucker, LLP	LEG	\$10,000.00	0.00	\$10,000.00	0.00
Voter Information Guide	slate - ID #593003	\$17,725.00	0.00	\$17,725.00	0.00
SUBTOTALS \$		27,725.00	\$ 0.00	\$ 27,725.00	0.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS \$** 27,725.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** (27,725.00)
May be a negative number

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Statement covers period
from 03/18/2006
through 05/20/2006

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NAME OF FILER			I. D. NUMBER
Friends of Mike Carona			961967
NAME OF AGENT OR INDEPENDENT CONTRACTOR			
Capital Campaigns			
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T	OFC		\$207.22
FedEx	OFC		\$223.98
Desiree Mouzoon	FND		\$134.69
		TOTAL \$	\$565.89

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Statement covers period
 from 03/18/2006
 through 05/20/2006

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NAME OF FILER				I. D. NUMBER
Friends of Mike Carona				961967
NAME OF AGENT OR INDEPENDENT CONTRACTOR				
Monaco Group				
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
USPO		POS		\$71,450.00
			TOTAL \$	\$71,450.00

Schedule I Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 03-18-2006
through 05-20-2006

SCHEDULE I
CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Friends of Mike Carona

I.D. NUMBER
961967

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
03-31-06 04-30-06 05-20-06	USBank	bank interest	\$457.14

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 457.14

Schedule I Summary

- Itemized increases to cash this period. \$ 457.14
- Unitemized increases to cash of under \$100 this period. \$ 0.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) TOTAL \$ 457.14